

Authority Budget of: Hearing, 12/13/2017

Harrison Redevelopment Agency

State Filing Year

2018

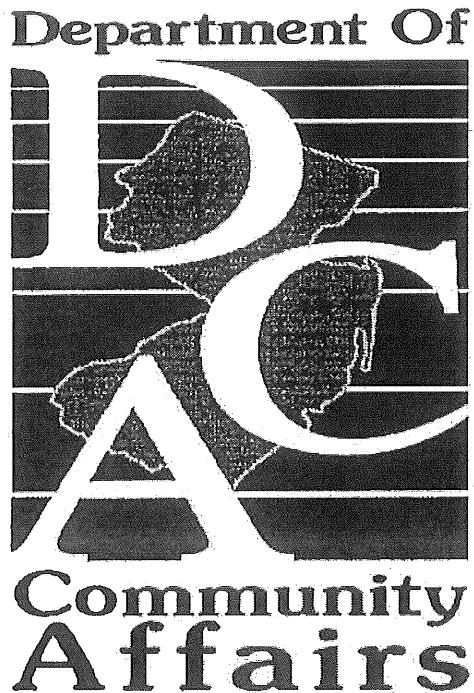
APPROVED COPY

For the Period:

January 1, 2018 to December 31, 2018

www.Townofharrison.com

Authority Web Address



Division of Local Government Services

2018 AUTHORITY BUDGET

Certification Section

2018

Harrison Redevelopment Agency
(Name)

AUTHORITY BUDGET

FISCAL YEAR: FROM January 1, 2018 TO December 31, 2018

For Division Use Only

CERTIFICATION OF APPROVED BUDGET

It is hereby certified that the approved Budget made a part hereof complies with the requirements of law and the rules and regulations of the Local Finance Board, and approval is given pursuant to N.J.S.A. 40A:5A-11.

*State of New Jersey
Department of Community Affairs
Director of the Division of Local Government Services*

By: Paul D. Cwest CPA, RMA Date: 12/6/2017

CERTIFICATION OF ADOPTED BUDGET

It is hereby certified that the adopted Budget made a part hereof has been compared with the approved Budget previously certified by the Division, and any amendments made thereto. This adopted Budget is certified with respect to such amendments and comparisons only.

*State of New Jersey
Department of Community Affairs
Director of the Division of Local Government Services*

By: _____ Date: _____

2018 PREPARER'S CERTIFICATION

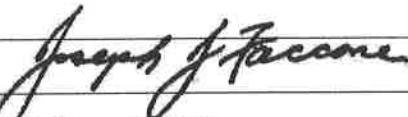
Harrison Redevelopment Agency
(Name)

AUTHORITY BUDGET

FISCAL YEAR: FROM: January 1, 2018 TO: December 31, 2018

It is hereby certified that the Authority Budget, including both the Annual Budget and the Capital Budget/Program annexed hereto, represents the members of the governing body's resolve with respect to statute in that: all estimates of revenue are reasonable, accurate and correctly stated; all items of appropriation are properly set forth; and in itemization, form and content, the budget will permit the exercise of the comptroller function within the Authority.

It is further certified that all proposed budgeted amounts and totals are correct. Also, I hereby provide reasonable assurance that all assertions contained herein are accurate and all required schedules are completed and attached.

Preparer's Signature:			
Name:	Joseph J. Faccone		
Title:	Auditor		
Address:	Samuel Klein and Company, CPA's 550 Broad Street, 11 th Floor Newark, New Jersey 07102		
Phone Number:	973-624-6100	Fax Number:	973-624-6101
E-mail address	jfaccone@sklein-cpa.com		

2018 APPROVAL CERTIFICATION

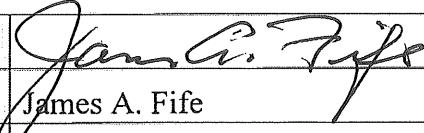
Harrison Redevelopment Agency
(Name)

AUTHORITY BUDGET

FISCAL YEAR: FROM: January 1, 2018 TO: December 31, 2018

It is hereby certified that the Authority Budget, including all schedules appended hereto, are a true copy of the Annual Budget and Capital Budget/Program approved by resolution by the governing body of the Harrison Redevelopment Agency, at an open public meeting held pursuant to N.J.A.C. 5:31-2.3, on the 13th day of November, 2017.

It is further certified that the recorded vote appearing in the resolution represents not less than a majority of the full membership of the governing body thereof.

Officer's Signature:			
Name:	James A. Fife		
Title:	Chairperson		
Address:	318 Harrison Avenue Harrison, New Jersey 07029		
Phone Number:	973-268-2440	Fax Number:	973-484-4575
E-mail address	jafife@townofharrison.com		

INTERNET WEBSITE CERTIFICATION

Authority's Web Address:	Townofharrison.com
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All authorities shall maintain either an Internet website or a webpage on the municipality's or county's Internet website. The purpose of the website or webpage shall be to provide increased public access to the authority's operations and activities. N.J.S.A. 40A:5A-17.1 requires the following items to be included on the Authority's website at a minimum for public disclosure. Check the boxes below to certify the Authority's compliance with N.J.S.A. 40A:5A-17.1.

- A description of the Authority's mission and responsibilities
- Commencing with 2013, the budgets for the current fiscal year and immediately preceding two prior years
- The most recent Comprehensive Annual Financial Report (Unaudited) or similar financial information
- Commencing with 2012, the annual audits of the most recent fiscal year and immediately two prior years
- The Authority's rules, regulations and official policy statements deemed relevant by the governing body of the authority to the interests of the residents within the authority's service area or jurisdiction
- Notice posted pursuant to the "Open Public Meetings Act" for each meeting of the Authority, setting forth the time, date, location and agenda of each meeting
- Beginning January 1, 2013, the approved minutes of each meeting of the Authority including all resolutions of the board and their committees; for at least three consecutive fiscal years
- The name, mailing address, electronic mail address and phone number of every person who exercises day-to-day supervision or management over some or all of the operations of the Authority
- A list of attorneys, advisors, consultants and any other person, firm, business, partnership, corporation or other organization which received any remuneration of \$17,500 or more during the preceding fiscal year for any service whatsoever rendered to the Authority.

It is hereby certified by the below authorized representative of the Authority that the Authority's website or webpage as identified above complies with the minimum statutory requirements of N.J.S.A. 40A:5A-17.1 as listed above. A check in each of the above boxes signifies compliance.

Name of Officer Certifying compliance

James A. Fife

Title of Officer Certifying compliance

Chairperson

Signature



2018 AUTHORITY BUDGET RESOLUTION
Harrison Redevelopment Agency
(Name)
RESOLUTION NO. 2-11-2017

FISCAL YEAR: **FROM:** January 1, 2018 **TO:** December 31, 2018

WHEREAS, the Annual Budget and Capital Budget for the Harrison Redevelopment Agency for the fiscal year beginning, January 1, 2018 and ending, December 31, 2018 has been presented before the governing body of the Harrison Redevelopment Agency at its open public meeting of November 13, 2017; and

WHEREAS, the Annual Budget as introduced reflects Total Revenues of \$369,000.00, Total Appropriations, including any Accumulated Deficit if any, of \$369,000.00 and Total Unrestricted Net Position utilized of \$ -0-; and

WHEREAS, the Capital Budget as introduced reflects Total Capital Appropriations of \$ -0- and Total Unrestricted Net Position planned to be utilized as funding thereof, of \$ -0-; and

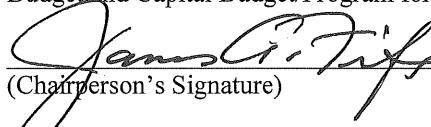
WHEREAS, the schedule of rates, fees and other charges in effect will produce sufficient revenues, together with all other anticipated revenues to satisfy all obligations to the holders of bonds of the Authority, to meet operating expenses, capital outlays, debt service requirements, and to provide for such reserves, all as may be required by law, regulation or terms of contracts and agreements; and

WHEREAS, the Capital Budget/Program, pursuant to N.J.A.C. 5:31-2, does not confer any authorization to raise or expend funds; rather it is a document to be used as part of the said Authority's planning and management objectives. Specific authorization to expend funds for the purposes described in this section of the budget, must be granted elsewhere; by bond resolution, by a project financing agreement, by resolution appropriating funds from the Renewal and Replacement Reserve or other means provided by law.

NOW, THEREFORE BE IT RESOLVED, by the governing body of the Harrison Redevelopment Agency, at an open public meeting held on November 13, 2016 that the Annual Budget, including all related schedules, and the Capital Budget/Program of the Harrison Redevelopment Agency for the fiscal year beginning, January 1, 2018 and ending, December 31, 2018 is hereby approved; and

BE IT FURTHER RESOLVED, that the anticipated revenues as reflected in the Annual Budget are of sufficient amount to meet all proposed expenditures/expenses and all covenants, terms and provisions as stipulated in the said Authority's outstanding debt obligations, capital lease arrangements, service contracts, and other pledged agreements; and

BE IT FURTHER RESOLVED, that the governing body of the Harrison Redevelopment Agency will consider the Annual Budget and Capital Budget/Program for adoption on December 13, 2016.


(Chairperson's Signature)

November 13, 2017

(Date)

Governing Body Member:	Recorded Vote			
	Aye	Nay	Abstain	Absent
James A. Fife, Chairperson	X			
Anthony Comprelli, Commissioner			X	
Harold Stahl, Commissioner	X			
Vanessa Gallagher, Commissioner	X			
Miguel Simoes, Commissioner			X	
Robert Gerris, Commissioner	X			
Raymond Lucas, Commissioner			X	

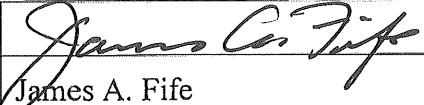
2018 ADOPTION CERTIFICATION

Harrison Redevelopment Agency
(Name)

AUTHORITY BUDGET

FISCAL YEAR: FROM: January 1, 2018 TO: December 31, 2018

It is hereby certified that the Authority Budget and Capital Budget/Program annexed hereto is a true copy of the Budget adopted by the governing body of the Harrison Redevelopment Agency, pursuant to N.J.A.C. 5:31-2.3, on the 13th day of December, 2017.

Officer's Signature:			
Name:	James A. Fife		
Title:	Chairperson		
Address:	318 Harrison Avenue Harrison, New Jersey 07029		
Phone Number:	973-268-2440	Fax Number:	973-484-4575
E-mail address	jafife@townofharrison.com		

2018 ADOPTED BUDGET RESOLUTION

Harrison Redevelopment Agency

(Name)

AUTHORITY

RESOLUTION NO. 2-12-2017

FISCAL YEAR: **FROM:** January 1, 2018 **TO:** December 31, 2018

WHEREAS, the Annual Budget and Capital Budget/Program for the Harrison Redevelopment Agency for the fiscal year beginning January 1, 2018 and ending, December 31, 2018 has been presented for adoption before the governing body of the Harrison Redevelopment Agency at its open public meeting of November 13, 2017; and

WHEREAS, the Annual Budget and Capital Budget as presented for adoption reflects each item of revenue and appropriation in the same amount and title as set forth in the introduced and approved budget, including all amendments thereto, if any, which have been approved by the Director of the Division of Local Government Services; and

WHEREAS, the Annual Budget as presented for adoption reflects Total Revenues of \$369,000.00, Total Appropriations, including any Accumulated Deficit, if any, of \$369,000.00 and Total Unrestricted Net Position utilized of \$ -0- ; and

WHEREAS, the Capital Budget as presented for adoption reflects Total Capital Appropriations of \$ -0- and Total Unrestricted Net Position planned to be utilized of \$ -0- ; and

NOW, THEREFORE BE IT RESOLVED, by the governing body of Harrison Redevelopment Agency, at an open public meeting held on December 13, 2017 that the Annual Budget and Capital Budget/Program of the Harrison Redevelopment Agency for the fiscal year beginning, January 1, 2018 and, ending, December 31, 2018 is hereby adopted and shall constitute appropriations for the purposes stated; and

BE IT FURTHER RESOLVED, that the Annual Budget and Capital Budget/Program as presented for adoption reflects each item of revenue and appropriation in the same amount and title as set forth in the introduced and approved budget, including all amendments thereto, if any, which have been approved by the Director of the Division of Local Government Services.



(Chairperson's Signature)

December 13, 2017

(Date)

Governing Body
Member:

Recorded Vote

Aye Nay Abstain Absent

James A. Fife, Chairperson	X
Anthony Comprelli, Commissioner	X
Harold Stahl, Commissioner	X
Vanessa Gallagher, Commissioner	X
Miguel Simoes, Commissioner	
Robert Gerris, Commissioner	X
Raymond Lucas, Commissioner	X

2018 AUTHORITY BUDGET

Narrative and Information Section

2018 AUTHORITY BUDGET MESSAGE & ANALYSIS
Harrison Redevelopment Agency
(Name)

AUTHORITY BUDGET

FISCAL YEAR: **FROM:** January 1, 2018 **TO:** December 31, 2018

Answer all questions below. Attach additional pages and schedules as needed.

1. Complete a brief statement on the 2018/2018-2019 proposed Annual Budget and make comparison to the 2017/2017-2018 adopted budget for each operation. Explain any variances over +/-10% (As shown on budget page F-4 explain the reason for changes for each appropriation changing more than 10%) for each line item by operation. Explanations of variances should include a description of the reason for the increase/decrease in the budgeted line item, not just an indication of the amount and percent of the change. Attach any supporting documentation that will help to explain the reason for the increase/decrease in the budgeted line item. For example, if anticipated service charges have increased 15% due to an increase in rates, provide a copy of the resolution authorizing the rate increase. As Redevelopment is increasing, the cost of the planner has also increased as the Commissioners are including more of an environmental approach to reflect a better community.
2. Complete a brief statement on the impact the proposed Annual Budget will have on Anticipated Revenues, especially service charges and on the general purpose/component unit financial statements. Explain significant increases or decreases, if any. An increase or decrease is considered significant if it is over +/-10% (As shown on budget page F-2 explain reason for change for each revenue changing more than 10%) from the current year adopted budget. As more Developers are building, so has the Administration Fee that is contractually required.
3. Describe the state of the local/regional economy and how it may impact the proposed Annual Budget, including the planned Capital Budget/Program. Developers are continually willing to work in Harrison.
4. Describe the reasons for utilizing Unrestricted Net Position in the proposed Annual Budget, i.e. rate stabilization, debt service reduction, to balance the budget, etc. If the Authority's budget anticipates a use of Unrestricted Net Position, this question must be answered. N/A
5. Identify any sources of funds transferred to the County/Municipality as a budget subsidy or a shared service and explain the reason for the transfer (i.e.: to balance the County/Municipality budget, etc.). N/A
6. The proposed budget must not reflect an anticipated deficit from 2018/2018-2019 operations. If there exists an accumulated deficit from prior years' budgets (and funding is included in the proposed budget as a result of a prior deficit) explain the funding plan to eliminate said deficit (N.J.S.A. 40A:5A-12). If the Authority has a net deficit reported in its most recent audit, it must provide a deficit reduction plan in response to this question. (Prepare a response to deficits caused by the implementation of GASB 68) N/A
7. Attach a schedule of the Authority's existing rate structure (connection fees, parking fees, service charges, etc.) if it has been changed since the prior year budget submission and a schedule of the proposed rate structure for the upcoming fiscal year. Explain any proposed changes in the rate structure and attach the resolution approving the change in the rate structure, if applicable. N/A

AUTHORITY CONTACT INFORMATION

2018

Please complete the following information regarding this Authority. All information requested below must be completed.

Name of Authority:	Harrison Redevelopment Agency		
Federal ID Number:			
Address:	318 Harrison Avenue		
City, State, Zip:	Harrison	NJ	07029
Phone: (ext.)	973-268-2440	Fax:	973-484-4575

Preparer's Name:	Joseph J. Faccone		
Preparer's Address:	Samuel Klein and Company, CPA's 550 Broad Street, 11 th Floor		
City, State, Zip:	Newark	NJ	07102
Phone: (ext.)	973-624-6100	Fax:	973-624-6101
E-mail:	jfaccone@sklein-cpa.com		

Chief Executive Officer:	James A. Fife		
Phone: (ext.)	973-268-2440	Fax:	973-484-4575
E-mail:	jafife@townofharrison.com		

Chief Financial Officer:			
Phone: (ext.)		Fax:	
E-mail:			

Name of Auditor:	Joseph J. Faccone		
Name of Firm:	Samuel Klein and Company, CPA's		
Address:	550 Broad Street, 11 th Floor		
City, State, Zip:	Newark	NJ	07102
Phone: (ext.)	973-624-6100	Fax:	973-624-6101
E-mail:	jfaccone@sklein-cpa.com		

AUTHORITY INFORMATIONAL QUESTIONNAIRE

Harrison Redevelopment Agency (Name)

FISCAL YEAR: FROM: January 1, 2018 TO: December 31, 2018

Answer all questions below completely and attach additional information as required.

- 1) Provide the number of individuals employed in (Use Most Recent W-3 Available 2016 or 2017) as reported on the Authority's Form W-3, Transmittal of Wage and Tax Statements: 2
- 2) Provide the amount of total salaries and wages as reported on the Authority's Form W-3, (Use Most Recent W-3 Available 2016 or 2017)Transmittal of Wage and Tax Statements: \$34,739.11
- 3) Provide the number of regular voting members of the governing body: 7
- 4) Provide the number of alternate voting members of the governing body: 0
- 5) Did any person listed on Page N-4 have a family or business relationship with any other person listed on Page N-4 during the current fiscal year? No If "yes," attach a description of the relationship including the names of the individuals involved and their positions at the Authority.
- 6) Did all individuals that were required to file a Financial Disclosure Statement for the current fiscal year (Most Recent Filing that March 31, 2017 or 2018 deadline has passed 2017 or 2018) because of their relationship with the Authority file the form as required? (Checked to see if individuals actually filed at <http://www.state.nj.us/dca/divisions/dlgs/resources/fds.html> before answering) Yes If "no," provide a list of those individuals who failed to file a Financial Disclosure Statement and an explanation as to the reason for their failure to file.
- 7) Does the Authority have any amounts receivable from current or former commissioners, officers, key employees or highest compensated employees? No If "yes," attach a list of those individuals, their position, the amount receivable, and a description of the amount due to the Authority.
- 8) Was the Authority a party to a business transaction with one of the following parties:
 - a. A current or former commissioner, officer, key employee, or highest compensated employee? No
 - b. A family member of a current or former commissioner, officer, key employee, or highest compensated employee? No
 - c. An entity of which a current or former commissioner, officer, key employee, or highest compensated employee (or family member thereof) was an officer or direct or indirect owner? No
If the answer to any of the above is "yes," attach a description of the transaction including the name of the commissioner, officer, key employee, or highest compensated employee (or family member thereof) of the Authority; the name of the entity and relationship to the individual or family member; the amount paid; and whether the transaction was subject to a competitive bid process.
- 9) Did the Authority during the most recent fiscal year pay premiums, directly or indirectly, on a personal benefit contract? A personal benefit contract is generally any life insurance, annuity, or endowment contract that benefits, directly or indirectly, the transferor, a member of the transferor's family, or any other person designated by the transferor. No If "yes," attach a description of the arrangement, the premiums paid, and indicate the beneficiary of the contract.
- 10) Explain the Authority's process for determining compensation for all persons listed on Page N-4. Include whether the Authority's process includes any of the following: 1) review and approval by the commissioners or a committee thereof; 2) study or survey of compensation data for comparable positions in similarly sized entities; 3) annual or periodic performance evaluation; 4) independent compensation consultant; and/or 5) written employment contract. *Attach a narrative of your Authorities procedures for all employees. The Treasurer and administrative assistant were approved by the Commissioners. Any future hires will also be approved.*
- 11) Did the Authority pay for meals or catering during the current fiscal year? No If "yes," attach a detailed list of all meals and/or catering invoices for the current fiscal year and provide an explanation for each expenditure listed.

12) Did the Authority pay for travel expenses for any employee or individual listed on Page N-4? No *If "yes," attach a detailed list of all travel expenses for the current fiscal year and provide an explanation for each expenditure listed.*

13) Did the Authority provide any of the following to or for a person listed on Page N-4 or any other employee of the Authority:

- First class or charter travel No
- Travel for companions No
- Tax indemnification and gross-up payments No
- Discretionary spending account No
- Housing allowance or residence for personal use No
- Payments for business use of personal residence No
- Vehicle/auto allowance or vehicle for personal use No
- Health or social club dues or initiation fees No
- Personal services (i.e.: maid, chauffeur, chef) No

If the answer to any of the above is "yes," attach a description of the transaction including the name and position of the individual and the amount expended.

14) Did the Authority follow a written policy regarding payment or reimbursement for expenses incurred by employees and/or commissioners during the course of Authority business and does that policy require substantiation of expenses through receipts or invoices prior to reimbursement? Yes *If "no," attach an explanation of the Authority's process for reimbursing employees and commissioners for expenses. (If your authority does not allow for reimbursements indicate that in answer)*

15) Did the Authority make any payments to current or former commissioners or employees for severance or termination? No *If "yes," attach explanation including amount paid.*

16) Did the Authority make any payments to current or former commissioners or employees that were contingent upon the performance of the Authority or that were considered discretionary bonuses? No *If "yes," attach explanation including amount paid.*

17) Did the Authority comply with its Continuing Disclosure Agreements for all debt issuances outstanding by submitting its audited annual financial statements, annual operating data, and notice of material events to the Municipal Securities Rulemaking Board's Electronic Municipal Marketplace Access (EMMA) as required? N/A *If "no," attach a description of the Authority's plan to ensure compliance with its Continuing Disclosure Agreements in the future.*

18) Did the Authority receive any notices from the Department of Environmental Protection or any other entity regarding maintenance or repairs required to the Authority's systems to bring them into compliance with current regulations and standards that it has not yet taken action to remediate? No *If "yes," attach explanation as to why the Authority has not yet undertaken the required maintenance or repairs and describe the Authority's plan to address the conditions identified.*

19) Did the Authority receive any notices of fines or assessments from the Department of Environmental Protection or any other entity due to noncompliance with current regulations (i.e.: sewer overflow, etc.)? No *If "yes," attach a description of the event or condition that resulted in the fine or assessment and indicate the amount of the fine or assessment.*

**AUTHORITY SCHEDULE OF COMMISSIONERS, OFFICERS, KEY EMPLOYEES,
HIGHEST COMPENSATED EMPLOYEES AND INDEPENDENT CONTRACTORS**

Harrison Redevelopment Agency

(Name)

FISCAL YEAR: FROM: January 1, 2018 TO: December 31, 2018

Complete the attached table for all persons required to be listed per #1-4 below.

- 1) List all of the Authority's current commissioners and officers and amount of compensation from the Authority and any other public entities as defined below. Enter zero if no compensation was paid.
- 2) List all of the Authority's key employees and highest compensated employees other than a commissioner or officer as defined below and amount of compensation from the Authority and any other public entities.
- 3) List all of the Authority's former officers, key employees and highest compensated employees who received more than \$100,000 in reportable compensation from the Authority and any other public entities during the most recent fiscal year completed.
- 4) List all of the Authority's former commissioners who received more than \$10,000 in reportable compensation from the Authority and any other public entities during the most recent fiscal year completed.

Commissioner: A member of the governing body of the authority with voting rights. Include alternates for purposes of this schedule.

Officer: A person elected or appointed to manage the authority's daily operations at any time during the year, such as the chairperson, vice-chairperson, secretary, or treasurer. For the purposes of this schedule, treat the authority's top management official and top financial official as officers. A member of the governing body may be both a commissioner and an officer for the purposes of this schedule.

Key employee: An employee or independent contractor of the authority (other than a commissioner or officer) who meets both of the following criteria:

- a) The individual received reportable compensation from the authority and other public entities in excess of \$150,000 for the most recent fiscal year completed; and
- b) The individual has responsibilities or influence over the authority as a whole or has power to control or determine 10% or more of the authority's capital expenditures or operating budget.

Highest compensated employee: One of the five highest compensated employees or independent contractors of the authority other than current commissioners, officers, or key employees whose aggregate reportable compensation from the authority and other public entities is greater than \$100,000 for the most recent fiscal year completed.

Compensation: All forms of cash and non-cash payments or benefits provided in exchange for services, including salaries and wages, bonuses, severance payments, deferred payments, retirement benefits, fringe benefits, and other financial arrangements or transactions such as personal vehicles, meals, housing, personal and family education benefits, below-market loans, payment of personal or family travel, entertainment, and personal use of the Authority's property. Compensation includes payments and other benefits provided to both employees and independent contractors in exchange for services.

Reportable compensation: (Use the Most Recent W-2 available 2017 or 2018). The aggregate compensation that is reported (or is required to be reported) on Form W-2, box 1 or 5, whichever amount is greater, and/or Form 1099-MISC, box 7, for the most recent calendar year ended 60 days before the start of the proposed budget year. For example, for fiscal years ending December 31, 2018, the most recent W-2 and 1099 should be used 2017 or 2016 (60 days prior to start of budget year is November 1, 2017, with 2016 being the most recent calendar year ended), and for fiscal years ending June 30, 2018, the calendar year 2017 W-2 and 1099 should be used (60 days prior to start of budget year is May 1, 2017, with 2017 being the most recent calendar year ended).

Other Public Entity: Any municipality, county, local authority, fire district, or other government unit, regardless of whether it is related in any way to the Authority either by function or by physical location.

Schedule of Health Benefits - Detailed Cost Analysis

Harrison Redevelopment Agency							
For the Period		January 1, 2018		to		December 31, 2018	
# of Covered Members (Medical & Rx) Proposed Budget	Annual Cost	Estimate per Employee Proposed Budget	Total Cost Estimate Proposed Budget	# of Covered Members (Medical & Rx) Current Year	Annual Cost per Employee Current Year	Total Prior Year Cost	\$ Increase (Decrease)
Active Employees - Health Benefits - Annual Cost							
Single Coverage	\$ 16,200	\$ 16,200	\$ 16,200	1	\$ 15,840	\$ 15,840	\$ 360
Parent & Child							#DIV/0!
Employee & Spouse (or Partner)							#DIV/0!
Family							#DIV/0!
Employee Cost Sharing Contribution (enter as negative -)							#DIV/0!
Subtotal	1	16,200	16,200	1	15,840	15,840	360
Commissioners - Health Benefits - Annual Cost							
Single Coverage							#DIV/0!
Parent & Child							#DIV/0!
Employee & Spouse (or Partner)							#DIV/0!
Family							#DIV/0!
Employee Cost Sharing Contribution (enter as negative -)							#DIV/0!
Subtotal	0	0	0	0	0	0	0
Retirees - Health Benefits - Annual Cost							
Single Coverage							#DIV/0!
Parent & Child							#DIV/0!
Employee & Spouse (or Partner)							#DIV/0!
Family							#DIV/0!
Employee Cost Sharing Contribution (enter as negative -)							#DIV/0!
Subtotal	0	(4,940)	(4,940)	0	(4,752)	(188)	4.0%
GRAND TOTAL	1	\$ 11,260	1	1	\$ 11,088	\$ 172	1.6%
Is medical coverage provided by the SHBP (Yes or No)? (Place Answer in Box)				Yes or No			
Is prescription drug coverage provided by the SHBP (Yes or No)? (Place Answer in Box)				Yes or No			

Note: Remember to Enter an amount in rows for Employee Cost Sharing

Schedule of Accumulated Liability for Compensated Absences

Harrison Redevelopment Agency
For the Period
January 1, 2018

December 31, 2018

Complete the below table for the Authority's accrued liability for compensated absences.

<i>X</i> Box if Authority has no Compensated Absences	<i>X</i>
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The total Amount Should agree to most recently issued audit report for the Authority

Schedule of Shared Service Agreements

Harrison Redevelopment Agency
January 1, 2018
For the Period
to

December 31, 2018

Enter the shared service agreements that the Authority currently engages in and identify the amount that is received/paid for those services.

**Amount to be
Received by/**

If No Shared Services X this Box

1

2018 AUTHORITY BUDGET

Financial Schedules Section

SUMMARY

Harrison Redevelopment Agency
For the Period January 1, 2018 to December 31, 2018

	<i>FY 2018 Proposed Budget</i>					<i>\$ Increase (Decrease)</i>	<i>% Increase (Decrease)</i>		
	<i>Redevelopment</i>	<i>N/A</i>	<i>N/A</i>	<i>N/A</i>	<i>N/A</i>	<i>FY 2017 Adopted Budget</i>	<i>Proposed vs. Adopted</i>		
REVENUES						<i>Total All Operations</i>	<i>Total All Operations</i>	<i>All Operations</i>	<i>All Operations</i>
Total Operating Revenues	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	#DIV/0!
Total Non-Operating Revenues	369,000	-	-	-	-	369,000	317,000	52,000	16.4%
Total Anticipated Revenues	369,000					369,000	317,000	52,000	16.4%
APPROPRIATIONS									#DIV/0!
Total Administration	101,750	-	-	-	-	101,750	98,500	3,250	3.3%
Total Cost of Providing Services	267,250	-	-	-	-	267,250	218,500	48,750	22.3%
Total Principal Payments on Debt Service in Lieu of Depreciation	-	-	-	-	-	-	-	-	#DIV/0!
Total Operating Appropriations	369,000	-	-	-	-	369,000	317,000	52,000	16.4%
Total Interest Payments on Debt	-	-	-	-	-	-	-	-	#DIV/0!
Total Other Non-Operating Appropriations	-	-	-	-	-	-	-	-	#DIV/0!
Total Non-Operating Appropriations	-	-	-	-	-	-	-	-	#DIV/0!
Accumulated Deficit	-	-	-	-	-	-	-	-	#DIV/0!
Total Appropriations and Accumulated Deficit	369,000					369,000	317,000	52,000	16.4%
Less: Total Unrestricted Net Position Utilized									#DIV/0!
Net Total Appropriations	369,000	-	-	-	-	369,000	317,000	52,000	16.4%
ANTICIPATED SURPLUS (DEFICIT)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	#DIV/0!

Revenue Schedule

Harrison Redevelopment Agency
For the Period January 1, 2018 to December 31, 2018

	FY 2018 Proposed Budget						FY 2017 Adopted Budget	\$ Increase (Decrease)	% Increase (Decrease)
	Redevelopment	N/A	N/A	N/A	N/A	Total All Operations			
OPERATING REVENUES									
<i>Service Charges</i>									
Residential									#DIV/0!
Business/Commercial									#DIV/0!
Industrial									#DIV/0!
Intergovernmental									#DIV/0!
Other									#DIV/0!
Total Service Charges									#DIV/0!
<i>Connection Fees</i>									
Residential									#DIV/0!
Business/Commercial									#DIV/0!
Industrial									#DIV/0!
Intergovernmental									#DIV/0!
Other									#DIV/0!
Total Connection Fees									#DIV/0!
<i>Parking Fees</i>									
Meters									#DIV/0!
Permits									#DIV/0!
Fines/Penalties									#DIV/0!
Other									#DIV/0!
Total Parking Fees									#DIV/0!
<i>Other Operating Revenues (List)</i>									
Type in (Grant, Other Rev)									#DIV/0!
Type in (Grant, Other Rev)									#DIV/0!
Type in (Grant, Other Rev)									#DIV/0!
Type in (Grant, Other Rev)									#DIV/0!
Type in (Grant, Other Rev)									#DIV/0!
Type in (Grant, Other Rev)									#DIV/0!
Type in (Grant, Other Rev)									#DIV/0!
Type in (Grant, Other Rev)									#DIV/0!
Type in (Grant, Other Rev)									#DIV/0!
Type in (Grant, Other Rev)									#DIV/0!
Type in (Grant, Other Rev)									#DIV/0!
Total Other Revenue									#DIV/0!
Total Operating Revenues									#DIV/0!
NON-OPERATING REVENUES									
<i>Other Non-Operating Revenues (List)</i>									
Administrative Fees	187,000						187,000	117,000	70,000
Reimbursements - Developers	182,000						182,000	200,000	(18,000)
Type in									#DIV/0!
Type in									#DIV/0!
Type in									#DIV/0!
Type in									#DIV/0!
Total Other Non-Operating Revenue	369,000						369,000	317,000	52,000
<i>Interest on Investments & Deposits (List)</i>									
Interest Earned									#DIV/0!
Penalties									#DIV/0!
Other									#DIV/0!
Total Interest									#DIV/0!
Total Non-Operating Revenues	369,000						369,000	317,000	52,000
TOTAL ANTICIPATED REVENUES	\$ 369,000	\$ -	\$ 369,000	\$ 317,000	\$ 52,000				
									16.4%
									16.4%

Prior Year Adopted Revenue Schedule

Harrison Redevelopment Agency

	<i>FY 2017 Adopted Budget</i>					Total All Operations
	Redevelopment	N/A	N/A	N/A	N/A	\$
OPERATING REVENUES						
<i>Service Charges</i>						
Residential						
Business/Commercial						
Industrial						
Intergovernmental						
Other						
Total Service Charges						
<i>Connection Fees</i>						
Residential						
Business/Commercial						
Industrial						
Intergovernmental						
Other						
Total Connection Fees						
<i>Parking Fees</i>						
Meters						
Permits						
Fines/Penalties						
Other						
Total Parking Fees						
<i>Other Operating Revenues (List)</i>						
Type in (Grant, Other Rev)						
Type in (Grant, Other Rev)						
Type in (Grant, Other Rev)						
Type in (Grant, Other Rev)						
Type in (Grant, Other Rev)						
Type in (Grant, Other Rev)						
Type in (Grant, Other Rev)						
Type in (Grant, Other Rev)						
Type in (Grant, Other Rev)						
Type in (Grant, Other Rev)						
Type in (Grant, Other Rev)						
Type in (Grant, Other Rev)						
Total Other Revenue						
Total Operating Revenues						
NON-OPERATING REVENUES						
<i>Other Non-Operating Revenues (List)</i>						
Administrative Fees						117,000
Reimbursements - Developers						200,000
Type in						
Type in						
Type in						
Type in						
Other Non-Operating Revenues						
<i>Interest on Investments & Deposits</i>						
Interest Earned						
Penalties						
Other						
Total Interest						
Total Non-Operating Revenues						317,000
TOTAL ANTICIPATED REVENUES	\$ 317,000	\$ -	\$ -	\$ -	\$ -	\$ 317,000

Appropriations Schedule

Harrison Redevelopment Agency
For the Period January 1, 2018 to December 31, 2018

	<i>FY 2018 Proposed Budget</i>						<i>FY 2017 Adopted Budget</i>	<i>\$ Increase (Decrease) Proposed vs. Adopted</i>	<i>% Increase (Decrease) Proposed vs. Adopted</i>
	Redevelopment	N/A	N/A	N/A	N/A	Total All Operations			
	nt	N/A	N/A	N/A	N/A	Total All Operations			
OPERATING APPROPRIATIONS									
Administration - Personnel									
Salary & Wages	\$ 87,000					\$ 87,000	\$ 85,000	\$ 2,000	2.4%
Fringe Benefits	12,600					12,600	11,500	1,100	9.6%
Total Administration - Personnel	99,600					99,600	96,500	3,100	3.2%
Administration - Other (List)									
Type in Description									#DIV/0!
Type in Description									#DIV/0!
Type in Description									#DIV/0!
Type in Description									#DIV/0!
Miscellaneous Administration*	2,150					2,150	2,000	150	7.5%
Total Administration - Other	2,150					2,150	2,000	150	7.5%
Total Administration	101,750					101,750	98,500	3,250	3.3%
Cost of Providing Services - Personnel									
Salary & Wages									#DIV/0!
Fringe Benefits									#DIV/0!
Total COPS - Personnel									#DIV/0!
Cost of Providing Services - Other (List)									
Legal Fees	148,700					148,700	138,000	10,700	7.8%
Planning	60,000					60,000	27,000	33,000	122.2%
Financial Consultant	21,900					21,900	20,000	1,900	9.5%
Audit	23,500					23,500	21,500	2,000	9.3%
Miscellaneous COPS*	13,150					13,150	12,000	1,150	9.6%
Total COPS - Other	267,250					267,250	218,500	48,750	22.3%
Total Cost of Providing Services	267,250					267,250	218,500	48,750	22.3%
Total Principal Payments on Debt Service in Lieu of Depreciation									
Total Operating Appropriations	369,000					369,000	317,000	52,000	16.4%
NON-OPERATING APPROPRIATIONS									
Total Interest Payments on Debt									
Operations & Maintenance Reserve									
Renewal & Replacement Reserve									
Municipality/County Appropriation									
Other Reserves									
Total Non-Operating Appropriations									
TOTAL APPROPRIATIONS	369,000					369,000	317,000	52,000	16.4%
ACCUMULATED DEFICIT									
TOTAL APPROPRIATIONS & ACCUMULATED DEFICIT	369,000					369,000	317,000	52,000	16.4%
UNRESTRICTED NET POSITION UTILIZED									
Municipality/County Appropriation									
Other									
Total Unrestricted Net Position Utilized									
TOTAL NET APPROPRIATIONS	\$ 369,000	\$ -	\$ -	\$ -	\$ -	\$ 369,000	\$ 317,000	\$ 52,000	16.4%

* Miscellaneous line items may not exceed 5% of total operating appropriations shown below. If amount in miscellaneous is greater than the amount shown below, then the line item must be itemized above.

5% of Total Operating Appropriations \$ 18,450.00 \$ - \$ - \$ - \$ - \$ - \$ 18,450.00

Prior Year Adopted Appropriations Schedule

Harrison Redevelopment Agency

	FY 2017 Adopted Budget						Total All Operations	
	Redevelopme nt	N/A	N/A	N/A	N/A	N/A		
OPERATING APPROPRIATIONS								
<i>Administration - Personnel</i>								
Salary & Wages	\$ 85,000						\$ 85,000	
Fringe Benefits	11,500						11,500	
Total Administration - Personnel	96,500						96,500	
<i>Administration - Other (List)</i>								
Type In Description							-	
Type In Description							-	
Type In Description							-	
Type In Description							-	
Miscellaneous Administration*	2,000						2,000	
Total Administration - Other	2,000						2,000	
Total Administration	98,500						98,500	
<i>Cost of Providing Services - Personnel</i>								
Salary & Wages							-	
Fringe Benefits							-	
Total COPS - Personnel							-	
<i>Cost of Providing Services - Other (List)</i>								
Legal Fees	138,000						138,000	
Planning	27,000						27,000	
Financial Consultant	20,000						20,000	
Audit	21,500						21,500	
Miscellaneous COPS*	12,000						12,000	
Total COPS - Other	218,500						218,500	
Total Cost of Providing Services	218,500						218,500	
<i>Total Principal Payments on Debt Service in Lieu of Depreciation</i>								
Total Operating Appropriations	317,000						317,000	
NON-OPERATING APPROPRIATIONS								
<i>Total Interest Payments on Debt</i>								
<i>Operations & Maintenance Reserve</i>								
<i>Renewal & Replacement Reserve</i>								
<i>Municipality/County Appropriation</i>								
<i>Other Reserves</i>								
Total Non-Operating Appropriations								
TOTAL APPROPRIATIONS								
ACCUMULATED DEFICIT								
TOTAL APPROPRIATIONS & ACCUMULATED DEFICIT								
UNRESTRICTED NET POSITION UTILIZED								
<i>Municipality/County Appropriation</i>								
<i>Other</i>								
Total Unrestricted Net Position Utilized								
TOTAL NET APPROPRIATIONS								
	\$ 317,000	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 317,000	

* Miscellaneous line items may not exceed 5% of total operating appropriations shown below. If amount in miscellaneous is greater than the amount shown below, then the line item must be itemized above.

5% of Total Operating Appropriations \$ 15,850.00 \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ 15,850.00

Debt Service Schedule - Principal

If Authority has no debt X this box	Harrison Redevelopment Agency															
	Fiscal Year Ending in															
	Proposed		2019		2020		2021		2022		2023		Thereafter		Total Principal Outstanding	
Adopted Budget Year 2017	Proposed Budget Year 2018														\$	
<i>Redevelopment</i>																
Type in Issue Name																
Type in Issue Name																
Type in Issue Name																
Type in Issue Name																
Type in Issue Name																
Total Principal																
<i>N/A</i>																
Type in Issue Name																
Type in Issue Name																
Type in Issue Name																
Type in Issue Name																
Type in Issue Name																
Total Principal																
<i>N/A</i>																
Type in Issue Name																
Type in Issue Name																
Type in Issue Name																
Type in Issue Name																
Type in Issue Name																
Total Principal																
<i>TOTAL PRINCIPAL ALL OPERATIONS</i>																
<i>Indicate the Authority's most recent bond rating and the year of the rating by ratings service.</i>																
<i>Moody's</i>																
<i>Fitch</i>																
<i>Standard & Poors</i>																
<i>Bond Rating</i>																
<i>Year of Last Rating</i>																

Debt Service Schedule - Interest

Harrison Redevelopment Agency

If Authority has no debt X this box

Net Position Reconciliation

Harrison Redevelopment Agency
For the Period January 1, 2018 to December 31, 2018

		FY 2018 Proposed Budget			Total All Operations	
	Redevelopment	N/A	N/A	N/A	N/A	
TOTAL NET POSITION BEGINNING OF LATEST AUDIT REPORT YEAR(1)	\$ 3,379					\$ 3,379
Less: Invested in Capital Assets, Net of Related Debt (1)						
Less: Restricted for Debt Service Reserve (1)						
Less: Other Restricted Net Position (1)						
Total Unrestricted Net Position (1)	3,379					3,379
Less: Designated for Non-Operating Improvements & Repairs						
Less: Designated for Rate Stabilization						
Less: Other Designated by Resolution						
Plus: Accrued Unfunded Pension Liability (1)						
Plus: Accrued Unfunded Other Post-Employment Benefit Liability (1)						
Plus: Estimated Income (Loss) on Current Year Operations (2)						
Plus: Other Adjustments (attach schedule)						
UNRESTRICTED NET POSITION AVAILABLE FOR USE IN PROPOSED BUDGET	10,879					10,879
Unrestricted Net Position Utilized to Balance Proposed Budget						
Unrestricted Net Position Utilized in Proposed Capital Budget						
Appropriation to Municipality/County (3)						
Total Unrestricted Net Position Utilized in Proposed Budget						
PROJECTED UNRESTRICTED UNDESIGNATED NET POSITION AT END OF YEAR	\$ 10,879					\$ 10,879
Last Issued Audit Report (4)						

(1) Total of all operations for this line item must agree to audited financial statements.

(2) Include budgeted and unbudgeted use of unrestricted net position in the current year's operations.

(3) Amount may not exceed 5% of total operating appropriations. See calculation below.

Maximum Allowable Appropriation to Municipality/County \$ 18,450

(4) If Authority is projecting a deficit for any operation at the end of the budget period, the Authority must attach a statement explaining its plan to reduce the deficit, including the timeline for elimination of the deficit, if not already detailed in the budget narrative section.

2018
Harrison
Redevelopment
Agency
(Name)

AUTHORITY
CAPITAL
BUDGET/
PROGRAM

2018 CERTIFICATION OF AUTHORITY CAPITAL BUDGET/PROGRAM

Harrison Redevelopment Agency

(Name)

FISCAL YEAR: FROM: January 1, 2018 TO: December 31, 2018

[] It is hereby certified that the Authority Capital Budget/Program annexed hereto is a true copy of the Capital Budget/Program approved, pursuant to N.J.A.C. 5:31-2.2, along with the Annual Budget, by the governing body of the _____ Authority, on the _____ day of _____.

OR

[X] It is hereby certified that the governing body of the Harrison Redevelopment Agency have elected NOT to adopt a Capital Budget /Program for the aforesaid fiscal year, pursuant to N.J.A.C. 5:31-2.2 for the following reason(s): There are none planned during 2018

Officer's Signature:			
Name:	James A. Fife		
Title:	Chairperson		
Address:	318 Harrison Avenue Harrison, New Jersey 07029		
Phone Number:	973-268-2440	Fax Number:	973-484-4575
E-mail address	jafife@townofharrison.com		

2018 CAPITAL BUDGET/PROGRAM MESSAGE

Harrison Redevelopment Agency (Name)

FISCAL YEAR: **FROM:** January 1, 2018 **TO:** December 31, 2018

1. Has each municipality or county affected by the actions of the authority participated in the development of the capital plan and reviewed or approved the plans or projects included within the Capital Budget/Program? Not Applicable
2. Has each capital project/project financing been developed from a specific capital improvement plan or report; does it include full lifecycle costs; and is it consistent with appropriate elements of Master Plans or other plans in the jurisdiction(s) served by the authority? Not Applicable
3. Has a long-term (10-20 years) infrastructure needs assessment or other capital plan with a horizon beyond six years been prepared? Not Applicable
4. Describe the projected impact of the proposed capital projects, including impact on the schedule of rates, fees, and service charges and the impact on current and future year's schedules. Not Applicable
5. Please indicate which capital projects/project financings are being undertaken in the Metropolitan or Suburban Planning Areas as defined in the State Development and Redevelopment Plan. Not Applicable
6. Please indicate which capital projects/project financings are being undertaken within the boundary of a State Planning Commission-designated Center and/or Endorsed Plan and if the project was included in the Plan Implementation Agenda for that Center/Endorsed Plan. Not Applicable

Add additional sheets if necessary.

Proposed Capital Budget

N/A

Harrison Redevelopment Agency

For the Period January 1, 2018 to December 31, 2018

	Estimated Total Cost	Funding Sources				
		Unrestricted Net Position Utilized	Renewal & Replacement Reserve	Debt Authorization	Capital Grants	Other Sources
<i>Redevelopment</i>						
Type in Description	\$ -					
Type in Description	\$ -					
Type in Description	\$ -					
Type in Description	\$ -					
Total	\$ -					
N/A						
Type in Description	\$ -					
Type in Description	\$ -					
Type in Description	\$ -					
Type in Description	\$ -					
Total	\$ -					
N/A						
Type in Description	\$ -					
Type in Description	\$ -					
Type in Description	\$ -					
Type in Description	\$ -					
Total	\$ -					
N/A						
Type in Description	\$ -					
Type in Description	\$ -					
Type in Description	\$ -					
Type in Description	\$ -					
Total	\$ -					
N/A						
Type in Description	\$ -					
Type in Description	\$ -					
Type in Description	\$ -					
Type in Description	\$ -					
Total	\$ -					
N/A						
Type in Description	\$ -					
Type in Description	\$ -					
Type in Description	\$ -					
Type in Description	\$ -					
Total	\$ -					
TOTAL PROPOSED CAPITAL BUDGET	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

Enter brief description of up to four projects for each operation above. For operations with more than four budgeted projects, please attach additional schedules. Input total amount of all projects for the operation on single line and enter "See Attached Schedule" instead of project description.

5 Year Capital Improvement Plan

Harrison Redevelopment Agency
 For the Period January 1, 2018 to December 31, 2018

Fiscal Year Beginning in

	Estimated Total Cost	Current Budget				
		Year 2018	2019	2020	2021	2022
<i>Redevelopment</i>						
Type in Description	\$ -	\$ -				
Type in Description						
Type in Description						
Type in Description						
Total						
<i>N/A</i>						
Type in Description						
Type in Description						
Type in Description						
Type in Description						
Total						
<i>N/A</i>						
Type in Description						
Type in Description						
Type in Description						
Type in Description						
Total						
<i>N/A</i>						
Type in Description						
Type in Description						
Type in Description						
Type in Description						
Total						
<i>N/A</i>						
Type in Description						
Type in Description						
Type in Description						
Type in Description						
Total						
TOTAL	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

Project descriptions entered on Page CB-3 will carry forward to Pages CB-4 and CB-5. No need to re-enter project descriptions above.

5 Year Capital Improvement Plan Funding Sources

Harrison Redevelopment Agency
 For the Period January 1, 2018 to December 31, 2018

	Estimated Total Cost	Funding Sources				
		Renewal &		Replacement Reserve	Debt Authorization	Capital Grants
		Unrestricted Net Position Utilized				
<i>Redevelopment</i>						
Type in Description	\$ -					
Type in Description	\$ -					
Type in Description	\$ -					
Type in Description	\$ -					
Total	\$ -					
<i>N/A</i>						
Type in Description	\$ -					
Type in Description	\$ -					
Type in Description	\$ -					
Type in Description	\$ -					
Total	\$ -					
<i>N/A</i>						
Type in Description	\$ -					
Type in Description	\$ -					
Type in Description	\$ -					
Type in Description	\$ -					
Total	\$ -					
<i>N/A</i>						
Type in Description	\$ -					
Type in Description	\$ -					
Type in Description	\$ -					
Type in Description	\$ -					
Total	\$ -					
<i>N/A</i>						
Type in Description	\$ -					
Type in Description	\$ -					
Type in Description	\$ -					
Type in Description	\$ -					
Total	\$ -					
TOTAL	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Total 5 Year Plan per CB-4	\$ -					
Balance check	\$ -					

- If amount is other than zero, verify that projects listed above match projects listed on CB-4.

Project descriptions entered on Page CB-3 will carry forward to Pages CB-4 and CB-5. No need to re-enter project descriptions above.